Author's response to reviews

Title: Perceptions and actions of healthcare professionals regarding mother-child relationship in an intermediate neonatal intensive care unit: a qualitative study

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Author's response to reviews: see over
Dear Dr. van Teijlingen,

Please find enclosed our revised version of the manuscript “Perceptions and actions of healthcare professionals regarding mother-child relationship in an intermediate neonatal intensive care unit: a qualitative study” which now the title is: “Perceptions and actions of healthcare professionals regarding mother-child relationship with premature babies in an intermediate neonatal intensive care unit: a qualitative study”.

All the suggestions made by the reviewers were included in the text and are highlighted in red. The answers to each comment are below.

Best regards,

Maria Y Makuch; PhD

Reviewer's report

Reviewer: Cara Bicking Kinsey

General Comments:

This is a generally well-written report of a qualitative research study. The exemplars included in the results section match the description of each theme and the data is presented in a logical order.

Discretionary Revisions

(which are recommendations for improvement but which the author can choose to ignore)

1) In the first paragraph under background, you write of “physical and emotional bonding”. I am not sure what physical bonding might be. As a researcher who
has extensively examined the concept of maternal-infant bonding, I encourage you to be a little more clear and consistent about what you are describing. This is based on my own bias about how bonding should be presented in the literature, and is certainly not a necessary revision, just a suggestion. **We reformulated as requested.** If you are interested, please see my published concept analysis:


**Minor Essential Revisions**

(such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

2) In the abstract, “a NICU” needs to be changed to “an NICU”. This should be corrected throughout the manuscript. Also in the abstract, the first sentence under results and the first sentence under conclusion appear to be missing words. **Done**

3) Under background, second paragraph second sentence appears to have extra words. Also, the objective of the study presented in the background does not match the abstract. It adds “the needs of these mothers” which I don’t think is really an objective of the study. Please consider removing that. **Done**

4) Under methods, the theoretical framework is a little difficult to understand. I suggest working with some colleagues who aren’t familiar with the theory to try to refine your description. The last sentence in the second paragraph is also confusing. In the methods section, please include the language in which interviews were conducted and a statement about translation if necessary. Missing a word in the second to last sentence under type of study. **We reformulated as requested**

5) There is inconsistency in the terms used to describe the role of the HCPs (i.e.
in the abstract the term “nurse” is used but in the recruitment and sampling section is says “assistant nurse”. Is there a difference? Please be consistent, including in Table 1). **You are right, corrected** Table 1 should also include %, not just n. **We consider that in qualitative research there is no need for %**.

6) In the results section, at times you refer to premature babies in a way that suggests that these are the only types of babies that are in your NICU. Please be clear about whether or not this is true. In the third paragraph of the results section, you inconsistently use the words “their” and “her” referring to the mother. **Corrected**

7) Please reconsider the word “mediator” in the 7th paragraph of the discussion. Is this the word used by your references here? I think of a mediator as something that is necessary for the cause and effect to occur (a step on the causal pathway) but I think a mother-child relationship could occur without the nursing team. Perhaps the nursing team is just a positive influence. **Done**

8) You have several sentences that are too long and thus difficult to understand. They are: abstract second sentence; methods first sentence; type of study second sentence; data analysis second sentence. **Corrected**

9) I don’t feel that Figure 1 adds to our understanding of the themes. I am not sure what it is trying to show with respect to the relationship between the four items? **We maintain the figure because we believe it is useful for the understanding.**

**Major Compulsory Revisions**

10) There are no limitations reported in this study. **Included**

11) I am not an expert in qualitative research, but do have some experience and I feel that this study may lack rigor, at least in the way it is presented in the manuscript. The authors do not describe or reference the phenomenological research method in any detail, and as it is, I am wondering if they have used phenomenology or if they have really completed a thematic analysis. I also am a little confused as to why there are themes and then “categories of analysis”. I
have never heard of the latter before, and usually researchers present the themes as the results. The authors also should report more about the ways in which they assured trustworthiness, credibility and authenticity. Simply stating that thematic content was cross-checked by a second researcher does not invoke confidence in the analysis. I believe the methods section needs to address the rigor of the study more clearly and with more detail. **Improved**

12) As a NICU nurse myself, I was a little disappointed with the discussion section. I felt that most of the knowledge gleaned from this study was commonsense or already known and the authors didn’t offer much explanation of what this research adds to our current knowledge. I think they should expand the discussion of the impact that this research might have. In the last sentence they mention “implementing measures”; what might these be? **Improved**

Reviewer's report

Title: Perceptions and actions of healthcare professionals regarding mother-child relationship in an intermediate neonatal intensive care unit: a qualitative study

Reviewer: Tania McIntosh

This is a very interesting and well put together paper on a topic of importance to health professionals. The paper uses a qualitative methodology to explore the attitudes and experiences of health care professionals working with babies and families in the neonatal care environment. The paper draws on the theoretical concept of 'holding' to explore the physical and emotional care given by professionals, and the discourses around this. The researchers develop a nuanced appreciate of the drivers in care provision, and the contradictions and tensions in caring for the baby (their principal responsibility) whilst also supporting and encouraging the mother to develop a necessary bond with the baby. There is clearly a fine line that health professionals tread between expecting more from mothers than they are able to give, and being critical or
anxious for the baby if they give too much. Overall a thought-provoking paper which has applicability internationally and across care settings.

Major compulsory revisions:
None

1) Be clear in your title and abstract that you are focusing on premature babies, rather than the range of cases which may be seen in an NICU. It is not clear from interview guide that premature babies are your focus; please make clear types of cases cared for in NICU (ie are there term babies with congenital conditions etc, and was care of these not part of your study?) **Done**

2) In 'results' section of abstract and in 'conclusion' a more nuanced approach would be beneficial. You have glossed over the complexities of your findings at both these points, and including a recognition of these strengthens the paper. **Improved**

Minor essential revisions;
1) 2nd sentence of abstract hard to follow; suggest tightening it or splitting into two sentences. **Done**

2) A very brief definition of 'holding' would be useful in abstract. **Impossible due to words count limitation**

3) 'Parents' and 'mothers' used somewhat interchangably in first three paragraphs of Background. Be clear about your focus. **Corrected in part because in some parts the authors referred as parents**

4) define 'intermediate' in context of NICU; readers from other countries may not use same terminology. **Done**

5) 'Type of study'. Paragraph 1, include reference for theoretical basis.6) 'methods' 3rd paragraph, second sentence. Quite value laden; do you mean when baby in NICU or generally? Include reference **Done**

7) last sentence 'results' 'where' not 'were' **Done**

8) Be clear in your title and abstract that you are focusing on premature babies, rather than the range of cases which may be seen in an NICU. It is not clear from
interview guide that premature babies are your focus; please make clear types of cases cared for in NICU (ie are there term babies with congential conditions etc, and was care of these not part of your study?) Done

9) In 'results' section of abstract and in 'conclusion' a more nuanced approach would be benefical. You have glossed over the complexities of your findings at both these points, and including a recognition of these strenghtens the paper. Done

Discretionary revisions;

Would be useful for readers not familiar with service in this area to give brief detail about what proportion of total staff included in study and about what kinds of acre are given. How far to mums and babies travel? Do they tend to be admitted after delivering elsewhere? Almost the 50% of the staff participated. I suppose that you referred as what proportion of cadre. It is in Table 1. All the mums delivered at our hospital and those who are from other cities the university has a house where they can stay in front of the hospital.